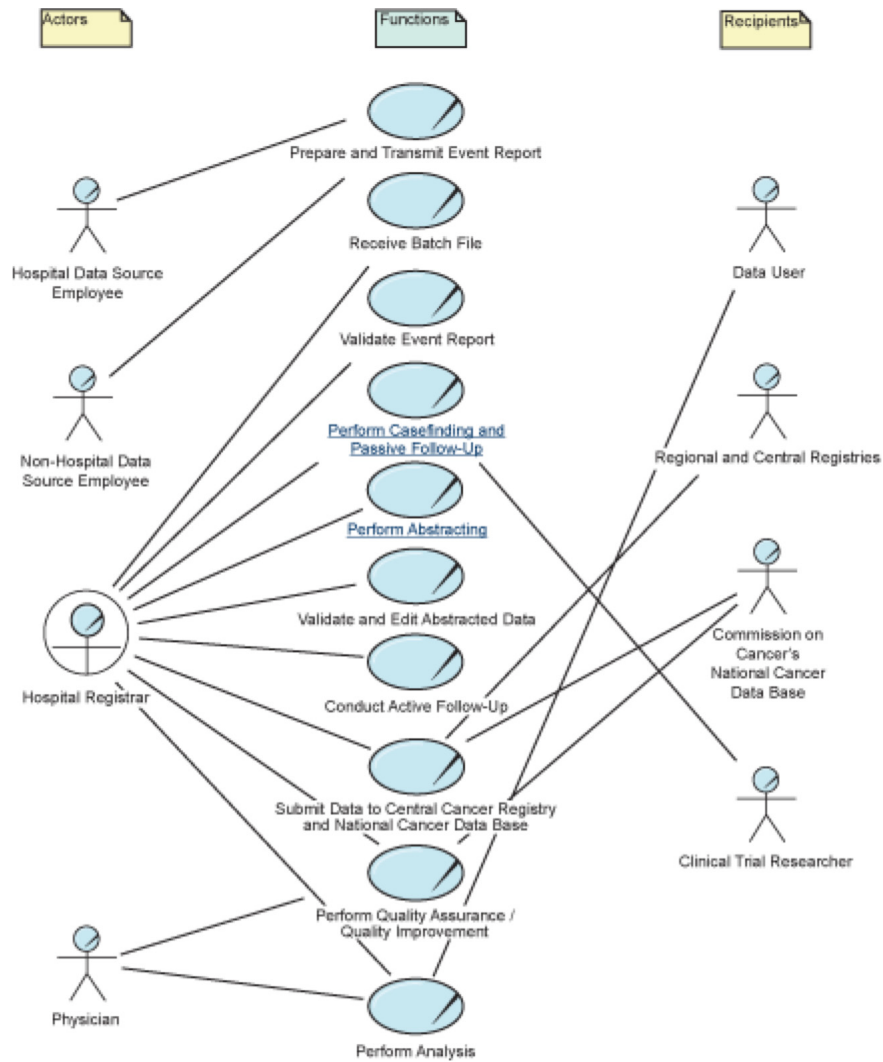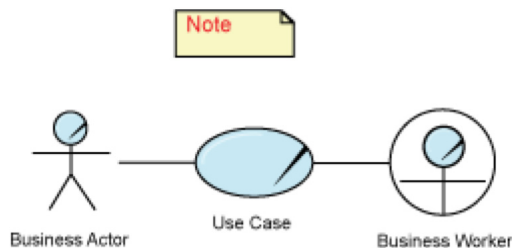# NPCR–MERP Hospital Business Use Case Diagram

The NPCR–MERP Hospital Cancer Registry Business Use Case Diagram shows the business process of a hospital cancer registry and its interaction with business workers and business actors. A *business worker* acts within the system, performs the processes, and interacts with other business workers and business actors. A *business actor* plays a role in relation to the business in the business environment, affecting it externally. In the diagram below, the actors perform different hospital registry functions, and the results of the actions are used by the recipients.

Legend

Actors

Actors include hospital data source employees, non-hospital data source employees, hospital registrars, and physicians.

Functions

Functions include preparing and transmitting event reports, receiving batch files, validating event reports, performing casefinding and passive follow-up, performing abstracting, validating and editing abstracted data, conducting active follow-up, submitting data to the central cancer registry and the National Cancer Data Base, performing quality assurance/quality improvement, and performing analysis.

- Hospital and non-hospital data source employees prepare and transmit event reports.

- Hospital registrars receive batch files, validate event reports, perform casefinding and passive follow-up, perform abstracting, validate and edit abstracted data, conduct active follow-up, submit data to the central cancer registry and the National Cancer Data Base, perform quality assurance/quality improvement, and perform analysis.

- Physicians perform quality assurance/quality improvement and analysis.

Recipients

Recipients include the data user, regional and central registries, the National Cancer Data Base, clinical trial researchers, and the Commission on Cancer.

- The data user receives analysis results.

- Regional and central registries receive submitted data.

- The Commision on Cancer's National Cancer Data Base receives submitted data and performs quality assurance/quality improvement.

- Clinical trial researchers receive the results of casefinding and passive follow-up, and submitted data.